

MENTAL HEALTH AND DISABILITY SERVICES COMMISSION

April 21, 2016 - 9:30 am to 1:00 pm
Polk County River Place, Room 1
2309 Euclid Ave, Des Moines, Iowa
MEETING MINUTES

MHDS COMMISSION MEMBERS PRESENT:

Thomas Bouska
Thomas Broeker
Jody Eaton
Marsha Edgington
Lynn Grobe
Kathryn Johnson
Betty King (phone)
Sharon Lambert

Geoff Lauer (phone)
Brett McLain (phone)
John Parmeter
Rebecca Peterson
Patrick Schmitz
Rebecca Schmitz
Marilyn Seemann
Jennifer Sheehan

MHDS COMMISSION MEMBERS ABSENT:

Senator Mark Costello
Richard Crouch
Representative David Heaton

Senator Liz Mathis
Representative Scott Ourth
Michael Polich

OTHER ATTENDEES:

Theresa Armstrong	MHDS, Bureau Chief, Community Services and Planning
Bob Bacon	The University of Iowa CDD
Teresa Bomhoff	NAMI Greater Des Moines
Jim Friberg	Department of Inspections and Appeals
Julie Jetter	DHS, Community Services and Planning
Misti Johnson	AmeriHealth Caritas Iowa
Steve Johnson	United Healthcare
Meghan Klier	Easter Seals Iowa
Ashley Lutgen	County Social Services MHDS Region
Caitlin Owens	The University of Iowa CDD
Jim Rixner	Siouxland Mental Health Center
Peter Schumacher	MHDS, Community Services & Planning/CDD
Steven Sehr	AmeriHealth Caritas Iowa
Rick Shults	DHS, MHDS Division Administrator
DJ Swope	Iowa Department on Aging

Welcome and Call to Order

Patrick Schmitz called the meeting to order at 9:36 am and led introductions. Quorum was established with twelve members present, and two participating by phone. Jody Eaton acknowledged a conflict of interest in voting for the approval of an amendment to the Central Iowa Community Services Policies and Procedures manual. She said she would abstain from the vote as she is the Region's CEO.

Approval of Minutes

John Parmeter made a motion to approve the March 17 minutes as presented. Tom Broeker seconded. The motion passed unanimously.

Election of Officers effective May 1, 2016 – Jody Eaton, Tom Bouska, and John Parmeter

John Parmeter reported that the Nominations Committee met once by phone and chose to nominate Patrick Schmitz to remain as Chair, and Marsha Edgington to remain as Vice Chair. Geoff Lauer made a motion to approve the nominations. Becky Schmitz seconded the motion. The motion passed unanimously with Patrick Schmitz abstaining.

Approval of Central Iowa Community Services Policies and Procedures Manual Amendment – Jody Eaton and Julie Jetter

Jody presented a document that explained the amendment Central Iowa Community Services (CICS) has proposed to their Policies and Procedures Manual. Jody said that the amendment is regarding the appeals process. When the process was first developed, it was done with counties in mind. This amendment aligns with what CICS is currently doing as they are operating more as a region. Now the appeals will be sent to a central office rather than being sent to local county offices.

Patrick asked if the process is remaining largely the same except for the centralizing of the appeals. Jody said they would also have coordination officers who are approving services and doing considerations. Currently, local officers are making determinations and hearing the appeals, and the amendment would change that.

John Parmeter made a motion to approve the amendment. Tom Bouska seconded the motion. The motion passed unanimously with Jody Eaton abstaining.

Discussion of Administrative Rules regarding the process for approving subacute mental health care facility licensing applications to the Department of Inspections and Appeals – Theresa Armstrong and Rick Shults

Rick Shults said that the Department of Inspections and Appeals (DIA) had developed rules regarding the licensing of subacute beds in Iowa, but the Department was directed by legislation to develop a process to disperse seventy-five publicly funded subacute beds geographically across the state. Rick said that the subacute level of care is for people who need ongoing treatment, but do not need acute inpatient care.

Patrick asked for an explanation of what “publicly funded” meant in this context. Rick answered that it refers to anything that could be supported by tax funds including Medicaid or MHDS Regional funding. He said it was technically possible for a subacute facility to open without relying on any public funding, but it is not likely.

Rick said there is interest from several organizations looking to develop these services, but there is a limit on the total number of beds, and the beds need to be spread out across the state. No facility can have more than sixteen subacute beds. Rick said he believes that the MHDS Regions should have a big role in this process. While Iowa Code does not mention the MHDS Regions, subacute care is a core plus service, and Rick said he believed they should have input on the process.

Patrick asked what type of role the MHDS Regions would have. Rick said he could not say what would end up in the rules because their development is a collaborative effort, but he said his preference would be to have Regions at the table.

Kathy Johnson asked if subacute was meant to be a new level of care. Rick answered that subacute is a new level of care between acute inpatient and outpatient. Currently there are individuals in acute inpatient care who do not require that level of treatment, but they are not ready to return to the community. Subacute would allow people to access appropriate and needed care in a less restrictive setting than inpatient.

Becky Schmitz asked if there would be restrictions on whether subacute beds could be in the same facility where other services were being provided. Jim Friberg from DIA answered that he believed there were provisions in the rules that would allow for another business in the same building if they were sufficiently separated.

Rick said he would like to move quickly to get the rules started in the process as soon as possible, but this would require a change in the Commission's schedule. Rules would need to be noticed and off of the Rules Administrator's desk by the end of the day on May 3. This would require a special meeting of the Commission before then to approve notice of the rules.

Patrick Schmitz said the Commission had options on how this could happen. The Commission could appoint a special subcommittee to provide input on the rules and authorize the subcommittee to approve notice, they could appoint the subcommittee, but require that the rules be noticed by the full Commission, or they could choose to not have a special meeting, and vote to approve notice at the next regular meeting on May 19. If the Commission did not want to expedite the process of noticing these rules, it would delay the effective date from early September into November.

John Parmeter asked if there were rules in other states that Iowa could use as a model. Rick answered that these are not rules for licensing facilities. These are rules to disperse beds across the state, and are part of an application process. There are not many other states that go through this process.

Rebecca Peterson asked if there were enough people willing to serve on a subcommittee. Geoff Lauer, Sharon Lambert, Kathy Johnson, and Jen Sheehan volunteered to serve on a subcommittee if one were to be appointed.

Geoff Lauer made a motion to appoint a subcommittee to provide input on the draft rules, but to require that they come before the full Commission in order to approve notice. Jen Sheehan seconded the motion. The motion passed unanimously.

Sharon Lambert asked if the subcommittee would receive background information on these rules. Theresa Armstrong answered that they would be receiving information the next morning.

It was agreed that the full Commission would have a phone meeting on Monday, May 2, 2016 to consider the approval of notice for the Administrative Rules regarding the process for approving subacute mental health care facility licensing applications to the Department of Inspections and Appeals.

DHS/MHDS Update – Theresa Armstrong and Rick Shults

Theresa Armstrong said that the Administrative Rules Review Committee (ARRC) met and voted to approve the rules regarding Mental Health Advocates that the Commission had adopted in February with a caveat. They delayed one section on data collection for seventy days, and asked for clarification on what the Department plans to do with the data they are

asking to be collected, and why they want that information. ARRC expressed concern that this could be an increased cost to counties. The rest of the rules will go into effect May 1.

Sharon Lambert asked if the data collection section would go into effect after the seventy days. Theresa answered that the Department would like to review the section with the Commission to consider amending the rules, and report back to ARRC.

Patrick asked the subcommittee that had reviewed the rules before to participate in the review of the rules. The subcommittee will consist of Becky Schmitz, Betty King, Jen Sheehan, Jody Eaton, John Parmeter, Marilyn Seemann, Patrick Schmitz, and Rebecca Peterson. Theresa Armstrong said she and Jan Heikes have a meeting schedule with the Iowa State Association of Counties (ISAC) to discuss how the data could be integrated into the counties' current data collection system.

Theresa said the Department is also working on a rewrite of Iowa Administrative Code Chapter 24, which concerns accreditation of mental health providers. There is a meeting with Commission committee members on Friday to continue the review. There is also a Commission committee looking at a portion of the accreditation rules for providers of mental health crisis services, and they will meet following the full Commission meeting.

Theresa said development of the new Olmstead Plan is ongoing, and Connie Fanselow has been meeting with stakeholders, and plans to go out into the community to meet with more groups soon. Theresa said Connie will come and do another progress report in May, and the Department anticipates having the plan finalized and in place towards the end of the summer.

Geoff Lauer said that members of the Olmstead Consumer Taskforce who are involved in the development of the plan are very concerned with making sure that the outcomes in the plan are measurable, and that there is accountability in the plan for who is responsible for certain portions and in what timeframes.

Theresa said the Department has issued a Request for Proposals (RFP) for the Office of Consumer Affairs (OCA). Currently, it is run by Iowa Advocates for Mental Health Recovery, but the Department cannot extend the contract again without going through a competitive bid process. The OCA is meant to give people with lived experience with mental health issues and their family members a voice in state government. The proposals are due on June 17th, and Theresa said the Department hopes to announce who was awarded the contract at the August Commission meeting.

Rick Shults spoke about the Health and Human Services Appropriations bill. Rick said the House had passed the bill and sent it over to the Senate. There are some key pieces Rick said he wanted to highlight. The Autism Support Program will continue, but the program will now serve children up to age fourteen instead of nine, and the income limit has been extended up to 500% of the Federal Poverty Level (FPL). Rick said there is funding for Iowa's facilities and civil commitment for sex offender program. These had been funded through one-time efforts in the past, and Rick said he appreciated the funding being included in the budget this year. The House version also contains \$4 million for the Medicaid Home and Community-Based Services Waiver Programs, and a 1% rate increase for providers of those services. There were funds appropriated for MHDS Regions that would provide Polk County with \$2 million and Eastern Iowa MHDS with \$500,000.

Rick said the Senate has taking this bill up and moving some things around. One of the main differences was an appropriation for the University of Iowa Hospitals and Clinics, and was paid for with a reduction in funds for the Medicaid Waiver Programs.

Rick spoke about the Children's Mental Health and Well-Being Workgroup bill that was passed in the Senate. The bill was not taken up in the House, but the language was included in the House's appropriation bill.

Rick said that there is language asking the Department to do a study on the progress of the Mental Health Redesign, and have requested that the study include fiscal viability and sustainability.

Theresa Armstrong said that the appropriations bill included funding for Iowa's Systems of Care programs. The bill also has a study on Children's mental health that has named the Commission and the Mental Health Planning and Advisory Council.

Sharon Lambert asked if there was anything in the bill about oversight for the managed care organizations in IA Health Link. Rick answered that there were provisions in the House bill and the Senate will be debating it.

SF 2144 is a bill that would allow for sharing of health information for the purposes of care coordination. Sharon Lambert asked Theresa to define care coordination. Theresa answered that it refers to coordinating care between physical, behavioral, and mental health.

There is a bill concerning individuals under a civil commitment order who are not complying with outpatient treatment and are considered to be a danger to themselves or others. This bill would allow a judge to order the individual into protective custody. The officer would bring the individual to the outpatient provider where the individual would have the option to comply with treatment including injectable medications. If they choose not to comply, they would be brought to an inpatient provider. This bill has passed the House and the Senate.

I-START – Ashley Lutgen

Ashley Lutgen introduced herself and presented several handouts on the County Social Services Region's I-START (Systemic, Therapeutic, Assessment, Resources, and Treatment). Ashley said that I-START is designed to help individuals with very complex needs that can have trouble finding the services they need in the system. The program is very focused on finding which pieces have been dropped and what adjustments need to be made to make the system work for the individual. Each START coordinator has to go through approximately eighty-six hours of training, and go through a final certification review with the national START program. START coordinators are limited to a caseload of thirty individuals, and currently in Iowa, they average approximately ten each.

Ashley explained that the START coordinator will meet with the individual and their care team, and do assessments to show the individual's baseline and to track their progress. There is a review of their services, medication, and natural supports. There is a lot of communication about the services the individual receives and where the gaps are. The START coordinator will develop a cross-system crisis intervention plan meant to prevent crises and de-escalate individuals experiencing a crisis.

Ashley said that I-START is a professional learning community. There is an effort to create more expertise in the field. They have regular meetings with members of the national START program for technical assistance and guidance.

To be eligible for the I-START program, an individual must be at least fourteen years old, though they will consult with families of children as young as six years to provide resources, the individual must have an intellectual disability, developmental disability, or brain injury diagnosis, and legal residency within the County Social Services Region.

Patrick Schmitz asked if those regular technical assistance meetings will continue after the program is certified or if they are just in preparation. Ashley said they will continue after the program is certified.

Becky Schmitz asked if a medical director was a requirement, and how many hours per week they needed to have one. Ashley answered that ideally, a medical director would be a psychiatrist available for twenty hours per week, and currently, they have an advanced registered nurse practitioner with excellent experience there for five hours per week.

Jody Eaton asked if they had planned to expand to other MHDS Regions. Ashley said they would love for I-START to be adopted statewide. Sharon Lambert asked how they would go about expanding the program statewide.

Sharon Lambert asked how Ashley would see the initiative moving towards going statewide. Ashley said they would approach the managed care organizations in IA Health Link and show that this program is cost-effective.

Tom Bouska asked how many cases are for individuals under the age of eighteen. Ashley answered that currently there are approximately six or seven individuals out of the approximately forty total cases that are younger than eighteen.

Planning for the May Meeting

Patrick reminded the Commission that there will be a joint meeting with the Mental Health Planning and Advisory Council on May 18th, and a full meeting on May 19th that will include an "orientation" from various staff from the Department.

There was a request for a legislative forum, and a presentation on oversight for IA Health Link.

Public Comment

There was no public comment.

Recognition of Outgoing Commission Members – Patrick Schmitz

Patrick said that Marsha Edgington, Sharon Lambert, and Brett McLain have been confirmed to serve second terms. Marilyn Seemann and Rebecca Peterson have been reappointed, and are awaiting confirmation. Patrick Schmitz acknowledged Richard Crouch, whose second term will end at the end of April. Richard was unable to attend the meeting, but passed along remarks saying it was a pleasure to serve on the Commission, and was very impressed with the work the Commission was able to do in his six years of service.

The meeting was adjourned at 12:15 pm.

Minutes respectfully submitted by Peter Schumacher.